

Classification

REPORTS INVENTORY						CONTROL NO. DDS/OF-134			
PREPARE IN DUPLICATE									
1. TITLE OF REPORT (If a fill-in report include Form No.) Agency Owned Property in Possession of Contractors Report						2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING			
3. FUNCTIONAL AREA	<input type="checkbox"/>	PERSONNEL	<input type="checkbox"/>	TRAINING	ADMIN. GENERAL OTHER (specify)				
	<input checked="" type="checkbox"/>	LOGISTICS	<input type="checkbox"/>	SECURITY					
	<input type="checkbox"/>	MEDICAL	<input checked="" type="checkbox"/>	FINANCE					
4. NO. OF COPIES PREPARED 2		5. FREQUENCY (weekly, monthly, quarterly, etc.) Semi-Annual			6. DISTRIBUTION (No. of components not number of copies) 2				
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.			9. DIRECTIVE AUTHORITY REQUIRING REPORT Memo to C/Fin. Div. fm. C/Tech. Actg. Staff. 18 March 1960				
10. PREPARING COMPONENT (include lowest level contributing information to report) Office of Logistics/Procurement Division				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)					
12. COST FACTORS									
A. MANUAL PREPARATION AND REVIEW COSTS									
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED = COST PER YEAR		
GS-14	\$ 10.07		4		\$40.28		2 \$ 80.56		
B. COSTS OF COMPUTER PRODUCED REPORTS									
TOTAL COSTS PER YEAR						\$ 80.56			
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.									
14. FUTURE GOALS									
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS			
						MAN-HOURS		DOLLARS	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION				18. EXTENSION			
Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110067-2									